

NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.
 Completely fill in one circle.
 Print legible numbers and block letters, no script.

COMPLETE ALL SECTIONS
 before submitting or form will be returned.

I Reporting Information

Year: 2012
 Fill in circle if amendment ☒
 Report Period: ☐ January/June ☒ July/December
 Type of Lobbying: ☒ Nonprocurement ☐ Procurement ☐ Both
 Client Filing Fee Check Number: #CSR0048244

Credit card auth # 249 216

FOR OFFICE USE ONLY

RECEIVED JAN 14 2013

II Client Information

Name: Independent Power Producers of New York
 Permanent Business Address: 194 Washington Ave, Suite 315
 City: Albany State: NY ZIP code: 12210
 Business Phone: (518) 436 3749 Fax Number: (518) 436 0369
 Third Party Beneficiary (see instructions):

III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

A Type of Lobbyist: ☐ Retained ☐ Employed ☒ Designated
 Level of Gov't: ☒ State Lobbying ☐ Local Lobbying ☐ Both
 Name: Gavin Donohue Phone Number: 518 436 3749
 Address: 194 Washington Ave, Suite 315
 City: Albany State: NY ZIP code: 12210
 Compensation for current period: \$ 6480 .00

B Type of Lobbyist: ☐ Retained ☐ Employed ☒ Designated
 Level of Gov't: ☒ State Lobbying ☐ Local Lobbying ☐ Both
 Name: Radmila Miletich Phone Number: 518 436 3749
 Address: 194 Washington Ave, Suite 315
 City: Albany State: NY ZIP code: 12210
 Compensation for current period: \$ 1480 .00

C Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated
 Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both
 Name: Phone Number:
 Address: State: ZIP code:
 City: State: ZIP code:
 Compensation for current period: \$.00

☐ Continued on attached pages

D TOTAL COMPENSATION of ALL lobbyists for current period.....(A+B+C+addendum sheets): \$ 7960 .00

IV Other Expenses (Current Semi-Annual Period Only)

A Report in the aggregate all expenses less than or equal to \$75:	\$.00
B Report in the aggregate all expenses for salaries of non-lobbying employees:	\$.00
C Itemize each expense exceeding \$75:		
PAID TO:	DATE: / /	<input type="radio"/> Ad <input type="radio"/> Social Event
PURPOSE:	AMOUNT: \$.00	<input type="radio"/> *Addendum attached
<input type="radio"/> PROCUREMENT <input type="radio"/> NONPROCUREMENT		
PAID TO:	DATE: / /	<input type="radio"/> Ad <input type="radio"/> Social Event
PURPOSE:	AMOUNT: \$.00	<input type="radio"/> *Addendum attached
<input type="radio"/> PROCUREMENT <input type="radio"/> NONPROCUREMENT		
<input type="radio"/> Continued on attached pages		
* If any expense listed above exceeds \$75 for an individual, you must attach the addendum page listing the expense, dollar amount attributable to the individual and the name, title and employer of the individual.		
D Total expenses for current period: \$.00 (if applicable, include all expenses from attached pages in total)		

V Source of Funding Disclosure

Instructions: In the event only one person or entity is listed as the Single Source for a Contribution(s), use Section A. In the event multiple persons or entities have been aggregated as a Single Source for a Contribution(s), use Section B.

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received. If more than five Contributions from the Single Source have been received, use section V(C) of the Addendum for the additional Contributions.

Contribution(s) from Single Source #1

Single Source Entity's Name: **DC Energy**
or
Single Source Person's Last Name: First Name:
Address: **8045 Leesburg Pike, Suite 500**
City: **Vienna** State: **VA** ZIP code: **22182**
Phone: **703 760 3900**

Date Contribution Received: 1 / 30 / 2012	Amount of Contribution: \$ 250 .00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contribution(s) Single Source #2**

Single Source Entity's Name: **Mercer Management**
or
Single Source Person's Last Name: First Name:
Address: **Three E-Comm Square**
City: **Albany** State: **NY** ZIP code: **12207**
Phone: **518 434 1412**

Date Contribution Received: 1 / 19 / 2012	Amount of Contribution: \$ 419 .00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00
Date Contribution Received: / /	Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(A) of the Addendum to list all such Contributions: ☒

V Source of Funding Disclosure

B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.

Contributions from Single Source #1

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Check here if using section V(B) of the Addendum for additional Related, or Affiliated Entities or Persons: ☐

Contributions from Single Source #2

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Check here if using section V(B) of the Addendum for additional Related, or Affiliated Entities or Persons: ☐

Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(B) of the Addendum to list all such Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source 3Single Source Entity's Name: Fortistar

or

Single Source Person's Last Name:

First Name:

Address: 1 North Lexington AveCity: White PlainsState: NYZIP code: 10601Phone: 914 421 4900Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 750 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 4**Single Source Entity's Name: Indeck Energy Services

or

Single Source Person's Last Name:

First Name:

Address: 6000 N. Buffalo Grove Rd. #300City: Buffalo GroveState: ILZIP code: 60089Phone: 847 520 3212Date Contribution Received: 10 / 1 / 2012 Amount of Contribution: \$ 1,500 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 5**Single Source Entity's Name: CPR Valley Energy Center

or

Single Source Person's Last Name:

First Name:

Address: 50 Braintree Hill Office Park, Suite 300City: BraintreeState: MAZIP code: 02184Phone: 781 817 8970Date Contribution Received: 1 / 30 / 2012 Amount of Contribution: \$ 875 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 6

Single Source Entity's Name: HESS Corporation

or

Single Source Person's Last Name:

First Name:

Address: One Hess Plaza WB12

City: Woodbridge

State: NJ

ZIP code: 07095

Phone: 732 750 6000

Date Contribution Received: 4 / 18 / 2012

Amount of Contribution: \$ 875 .00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 7

Single Source Entity's Name: Capital Power Corporation

or

Single Source Person's Last Name:

First Name:

Address: 99 Summer Street, #1000

City: Boston

State: MA

ZIP code: 02110

Phone: 780 392 5542

Date Contribution Received: 2 / 4 / 2012

Amount of Contribution: \$ 1,025 .00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 8

Single Source Entity's Name: Remsselaer Cogeneration

or

Single Source Person's Last Name:

First Name:

Address: 109 N. Post Oak Lane, Suite 600

City: Houston

State: TX

ZIP code: 77024

Phone: 713 336 7858

Date Contribution Received: 1 / 18 / 2012

Amount of Contribution: \$ 1,025 .00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Date Contribution Received: / /

Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source 9Single Source Entity's Name: Dominion

or

Single Source Person's Last Name:

First Name:

Address: Prope Ferry Road, Bldg 475, 5th Flr.City: WaterfordState: CTZIP code: 06385Phone: 804 771 3795Date Contribution Received: 1 / 30 / 2012 Amount of Contribution: \$ 1,250 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 10**Single Source Entity's Name: EDP Renewables North America

or

Single Source Person's Last Name:

First Name:

Address: 808 Travis, Suite 700City: HoustonState: TXZIP code: 77002Phone: 312 435 1295Date Contribution Received: 3 / 19 / 2012 Amount of Contribution: \$ 1,330 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 11**Single Source Entity's Name: Invenergy LLC

or

Single Source Person's Last Name:

First Name:

Address: One South Wacker Drive, Suite 1900City: ChicagoState: ILZIP code: 60606Phone: 312 224 1400Date Contribution Received: 3 / 2 / 2012 Amount of Contribution: \$ 1,330 .00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Date Contribution Received: / / Amount of Contribution: \$.00Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source #12

Single Source Entity's Name: Cathness Long Island

or
Single Source Person's Last Name: First Name:

Address: 565 Fifth Ave, 29th floor

City: New York

State: NY

ZIP code: 10017

Phone: 212 921 9099

Date Contribution Received: 2 / 13 / 2012 Amount of Contribution: \$ 1,500 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #13

Single Source Entity's Name: NextEra Energy Resources

or
Single Source Person's Last Name: First Name:

Address: 700 Universe Blvd.

City: Juno Beach

State: FL

ZIP code: 33408

Phone: 561 691 7800

Date Contribution Received: 2 / 6 / 2012 Amount of Contribution: \$ 1,580 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #14

Single Source Entity's Name: First Wind

or
Single Source Person's Last Name: First Name:

Address: 129 Middle Street, 3rd flr.

City: Portland

State: ME

ZIP code: 04101

Phone: 207 228 4871

Date Contribution Received: 3 / 7 / 2012 Amount of Contribution: \$ 1580 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source #15

Single Source Entity's Name: Calpine Corporation

or
Single Source Person's Last Name:

First Name:

Address: 717 Texas Ave

City: Houston

State: TX

ZIP code: 77002

Phone: 713 830 2000

Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 1,750 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #16

Single Source Entity's Name: Selkirk Cogen Partners

or
Single Source Person's Last Name:

First Name:

Address: 24 Power Park Drive

City: Selkirk

State: NY

ZIP code: 12158

Phone: 518 475 5773

Date Contribution Received: 1 / 13 / 2012 Amount of Contribution: \$ 1,750 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #17

Single Source Entity's Name: Astoria Energy LLC

or
Single Source Person's Last Name:

First Name:

Address: 17-10 Steinway Street

City: Astoria

State: NY

ZIP code: 11105

Phone: 718 274 7700

Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 2,000 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 18

Single Source Entity's Name: Brookfield Renewable Energy Group

or
Single Source Person's Last Name: First Name:

Address: 200 Donald Lynch Blvd.

City: Marlborough

State: MA

ZIP code: 01752

Phone: 508 251 7650

Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 2,000 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 19

Single Source Entity's Name: PSEG Power New York

or
Single Source Person's Last Name: First Name:

Address: 130 Washington Ave

City: Albany

State: NY

ZIP code: 12210

Phone: 518 449 0050

Date Contribution Received: 2 / 10 / 2012 Amount of Contribution: \$ 2,000 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 20

Single Source Entity's Name: Constellation Energy Group

or
Single Source Person's Last Name: First Name:

Address: 111 Market Place

City: Baltimore

State: MD

ZIP code: 21203

Phone: 410 470 3398

Date Contribution Received: 1 / 30 / 2012 Amount of Contribution: \$ 2,745 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source #21

Single Source Entity's Name: GenOn Energy (merged with NRG in 2013)
or
Single Source Person's Last Name: _____ First Name: _____

Address: 1000 main Street

City: Houston

State: TX

ZIP code: 77002

Phone: 832 357 4977

Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 2,745 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #22

Single Source Entity's Name: New Athens Generating Company
or
Single Source Person's Last Name: _____ First Name: _____

Address: 9300 Route 9W, PO Box 309

City: Athens

State: NY

ZIP code: 12015

Phone: 518 945 3750

Date Contribution Received: 1 / 9 / 2012 Amount of Contribution: \$ 2,745 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source #23

Single Source Entity's Name: HQ Energy Services
or
Single Source Person's Last Name: _____ First Name: _____

Address: 225 Asylum Street

City: Hartford

State: CT

ZIP code: 06103

Phone: 860 241 4024

Date Contribution Received: 2 / 13 / 2012 Amount of Contribution: \$ 375 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source 24

Single Source Entity's Name: Ontario Power Generation

or
Single Source Person's Last Name: First Name:

Address: 700 University Ave, Room H18 G3

City: Toronto State: ON

ZIP code: M5G 1X6

Phone: 416 592 8541

Date Contribution Received: 2 / 6 / 2012 Amount of Contribution: \$ 375 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 25

Single Source Entity's Name: EverPower Wind Holdings

or
Single Source Person's Last Name: First Name:

Address: 44 East 30th Street, 10th Floor

City: New York State: NY

ZIP code: 10016

Phone: 212 647 8111

Date Contribution Received: 8 / 2 / 2012 Amount of Contribution: \$ 512 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 26

Single Source Entity's Name: Upstate Power Producers

or
Single Source Person's Last Name: First Name:

Address: 228 Cayuga Drive

City: Lansing State: NY

ZIP code: 14882

Phone: 607 533 7913

Date Contribution Received: 8 / 22 / 2012 Amount of Contribution: \$ 729 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 27Single Source Entity's Name: J-Power USAor
Single Source Person's Last Name:

First Name:

Address: 1900 E. Golf RoadCity: SchaumburgState: ILZIP code: 60173Phone: 847 908 2876Date Contribution Received: 10 / 9 / 2012 Amount of Contribution: \$ 375 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 28**Single Source Entity's Name: Capital Power Corporationor
Single Source Person's Last Name:

First Name:

Address: 99 Summer Street, Suite 1000City: BostonState: MAZIP code: 02110Phone: 780 392 5542Date Contribution Received: 12 / 4 / 2012 Amount of Contribution: \$ 1,230 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 29**Single Source Entity's Name: Energy Nuclear NEor
Single Source Person's Last Name:

First Name:

Address: 440 Hamilton Ave., 12th floorCity: White PlainsState: NYZIP code: 10601Phone: 914 272 3391Date Contribution Received: 12 / 4 / 2012 Amount of Contribution: \$ 3,294 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source 30

Single Source Entity's Name: TransCanada Corporation

or
Single Source Person's Last Name:

First Name:

Address: 110 Turnpike Road, Suite 203

City: Westborough

State: MA

ZIP code: 01581

Phone: 508 871 1850

Date Contribution Received: 12 / 4 / 2012 Amount of Contribution: \$ 3,294 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 31

Single Source Entity's Name: Caithness Long Island

or
Single Source Person's Last Name:

First Name:

Address: 545 Fifth Ave, 29th Flr.

City: New York

State: NY

ZIP code: 10017

Phone: 212 921 9099

Date Contribution Received: 12 / 12 / 2012 Amount of Contribution: \$ 1,800 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 32

Single Source Entity's Name: Brooklyn Navy Yard Cogen Partners

or
Single Source Person's Last Name:

First Name:

Address: 80 - 02 Kew Gardens Road, Suite 200

City: Kew Gardens

State: NY

ZIP code: 11415

Phone: 718 261 2164

Date Contribution Received: 12 / 12 / 2012 Amount of Contribution: \$ 2,100 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 33

Single Source Entity's Name: EquiPower Resources Corp.
or
Single Source Person's Last Name: _____ First Name: _____

Address: 100 Constitution Plaza, 10th Floor

City: Hartford

State: CT

ZIP code: 06103

Phone: 860 656 0822

Date Contribution Received: 12 / 12 / 2012 Amount of Contribution: \$ 2,400 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 34

Single Source Entity's Name: US Power Generating Company
or
Single Source Person's Last Name: _____ First Name: _____

Address: 300 Atlantic St., 5th Floor

City: Stamford

State: CT

ZIP code: 06901

Phone: 212 792 0897

Date Contribution Received: 12 / 12 / 2012 Amount of Contribution: \$ 3,294 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 35

Single Source Entity's Name: Bora Lax Operations
or
Single Source Person's Last Name: _____ First Name: _____

Address: 39 Hudson Falls Road

City: South Glens Falls

State: NY

ZIP code: 12803

Phone: 518 747 0930

Date Contribution Received: 12 / 13 / 2012 Amount of Contribution: \$ 1,230 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source 34

Single Source Entity's Name: IPR GDF SUEZ Energy North America

or
Single Source Person's Last Name: First Name:

Address: 1990 Post Oak Blvd, Suite 1900

City: Houston State: TX

ZIP code: 77056

Phone: 713-636-0000

Date Contribution Received: 12 / 13 / 2012 Amount of Contribution: \$ 2,100 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 37

Single Source Entity's Name: HQ Energy Services US

or
Single Source Person's Last Name: First Name:

Address: 225 Asylum Street

City: Hartford State: CT

ZIP code: 06103

Phone: 860 241 4024

Date Contribution Received: 12 / 21 / 2012 Amount of Contribution: \$ 450 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Contributions from Single Source # 38

Single Source Entity's Name: CPV Valley Energy Center

or
Single Source Person's Last Name: First Name:

Address: 50 Braintree Hill Office Park, Suite 300

City: Braintree State: MA

ZIP code: 02184

Phone: 781 817 8970

Date Contribution Received: 12 / 21 / 2012 Amount of Contribution: \$ 1,050 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 39Single Source Entity's Name: DC Energyor
Single Source Person's Last Name:

First Name:

Address: 8005 Leesburg Pike, Suite 500City: ViennaState: VAZIP code: 22182Phone: 703 760 3900Date Contribution Received: 12 / 26 / 2012 Amount of Contribution: \$ 300 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # 40**Single Source Entity's Name: Brookfield Renewable Energy Partnersor
Single Source Person's Last Name:

First Name:

Address: 200 Donald Lynch Blvd.City: MarlboroughState: MAZIP code: 01752Phone: 508 251 7650Date Contribution Received: 12 / 26 / 2012 Amount of Contribution: \$ 2,400 .00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contributions from Single Source # _____**

Single Source Entity's Name:

or

Single Source Person's Last Name:

First Name:

Address:

City:

State:

ZIP code:

Phone:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

VI Subjects lobbied:

☐ Continued on attached pages

VII Person, State Agency, Municipality or Legislative Body lobbied:

☐ Continued on attached pages

VII Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

☐ Continued on attached pages

VIII Title and Identifying Numbers of procurement contracts/documents lobbied:

☐ Continued on attached pages

IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied:

☐ Continued on attached pages

X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied:

☐ Continued on attached pages

XI Declaration

This Declaration must be signed by the Chief Administrative Officer. (If the Chief Administrative Officer, for any reason, does not sign, he/she must duly designate another person to sign this Declaration.) **(See instructions.)**

I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief.

X SIGNATURE:

PRINT NAME: LAST

TITLE:

Mark One:



Chief Administrative Officer

☐ Designee (Attach Letter)

DATE:

1/11/13

FIRST

Gawun

The following MUST be attached to this report at the time of submission:

- You must attach a **\$50 dollar filing fee** to each semi-annual report. (No fee is required for amendments to the original)
- If applicable, a designation letter if you have marked designee in section XI.
- If applicable, continuation sheets for sections III, IV, V, VI, VII, VIII, IX and X.

PLEASE NOTE You may be assessed up to **\$25** for each day this report is late.